



**ON MY WAY PRE-K Pilot Grant Program
Provider Agreement Form
August 2016-2017**



Pre-K Program Name: _____

Pre-K Program Address _____

City _____

Zip Code _____

I, _____, (insert your name) as an authorized representative of the On My Way Pre-K program located at the above address agree to fully participate as an enrolled On My Way Pre-K provider by agreeing to the following:

I agree that my On My Way Pre-K program will: **(please initial each)**

Adherence to applicable laws, rules and policies:

- _____ Comply on a continuing basis with all rules for participation established by the State of Indiana and Family and Social Services (FSSA).
- _____ Provide pre-k early education services to eligible 4 year old children with an On My Way Pre-K Grant for the hours/days/weeks per year as indicated on the *Provider Information Page* and that the information included on the Provider Information Page is accurate and complete.
- _____ Maintain program eligibility throughout the pre-k program year as defined by IC 12-17.2-7.2.
- _____ Report immediately any changes in eligibility status, including the loss of national or regional accreditation, to the Office of Early Childhood and Out-of-School Learning (OECOSL).
- _____ Acknowledge grants are not transferrable to other children. If a child with an On My Way Pre-K grant withdraws from my Pre-K program prior to the program end date, I understand any remaining installment payments will be adjusted based on a monthly prorated amount for that child based on the last date of attendance for that child. If the full reimbursement has already been paid, repayment may be collected from the Pre-K program based on the prorated amount of services reimbursed for but not rendered.
- _____ Participate in all required trainings and all mandatory meetings with the State or representatives of the State. These meetings may be held face to face and/or remotely via webinar or teleconference.
- _____ Participate in all site visits conducted by the State or representatives of the State, including fiscal auditing activities with regard to the On My Way Pre-K Grant program and pre-k program activity monitoring.
- _____ Allow families of children enrolled in the pre-k program to visit at any time the program is in operation.

Family Engagement and Child Attendance

- _____ Maintain accurate online attendance records for On My Way Pre-K via the attendance portal for enrolled children and submit attendance records as required by OECOSL.
- _____ Offer parental engagement and involvement activities in my pre-k program in alignment with the Family Engagement Framework adopted by the Indiana Early Learning Advisory Council (ELAC). Complete the Indiana Early Childhood Family Engagement Toolkit Self-Assessment adopted by the Indiana Early Learning



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Advisory Council (ELAC) within required timeframes. Programs will share self-assessment information as requested by OECOSL.

- _____ Enforce minimum attendance requirements of at least 85% of the days pre-k is offered for On My Way Pre-K enrolled children. Family engagement activities should include information on the importance of attendance and programs are encouraged to keep parents informed they are meeting attendance requirements. Programs may not disenroll grant children for failure to meet these requirements.
- _____ Agree to inform OECOSL within 5 business days of an On My Way Pre-K child being withdrawn. I acknowledge that retroactive repayment to the State of Indiana may be required or future payments may be adjusted as a result of the withdrawal of a student or changes to the law.
- _____ Maintain records of each On My Way Pre-K family's participation in family engagement activities and submit records as required by OECOSL.
- _____ Promote children's social-emotional and behavioral health and eliminate or severely limit the use of expulsion, suspension, and other exclusionary discipline practices; these exclusionary measures should be used only as a last resort in extraordinary circumstances where there is a determination of a serious safety threat that cannot otherwise be reduced or eliminated by the provision of reasonable modifications. OECOSL must be informed and approve and expulsion, suspension or other exclusionary discipline practices.
- _____ Assist families in obtaining information and/or referral to the public school where the parent resides (if parent chooses) for an educational evaluation and determination of eligibility for special education services if developmental delays or reasons to suspect a disability are observed by the parents or teachers during the pre-k program year.

Participation in Research Studies

- _____ Complete registration with the Indiana Department of Education as an administrator for the ISTAR-KR student assessment **prior to the beginning of the program start date**. Programs will assist families with the completion of the ISTAR-KR parent agreement so that each On My Way Pre-K child is assigned a Student Test Number (STN) within two weeks of the start date of each student with a grant. All staff and children must be assigned **no later than September 15th** of the program year, or On My Way Pre-K semester tuition payments may be held until completed.
- _____ Administer the kindergarten readiness assessment, ISTAR-KR, for children enrolled as On My Way Pre-K students, at least twice during the program year. The first assessment must be completed within six weeks of the child's start date and the last must be completed and entered prior to June 30th of the program year. Additional assessments through the program year are recommended in order to facilitate individualized student instruction.
- _____ Participate in the On My Way Pre-k pilot longitudinal study including participation in on-site student and classroom assessments conducted by the external evaluator, complete surveys, focus groups or teacher completed student assessments as needed and provide all necessary documentation to OECOSL within the required timeframes.



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Claims and Payments

_____ Complete and timely submit all required reports, including attendance and timely billing on approved claim forms following guidelines required by the state and FSSA. Programs also understand payments will be processed following state requirements and time limits followed by state agencies. After your claim is received, payment will be made net 35 days from the date the claim is approved by FSSA and submitted for payment processing.

_____ Be individually responsible and accountable for the completion, accuracy and validity of all claims submitted by program, program's employees or program's agents. Authorized representative of program understands that the submission of false claims, statements and documents or the concealment of material fact will be grounds for disapproval from the On My Way Pre-K grant and prosecution under applicable State Law.

Additionally, by my signature below, I understand that:

- I attest that I have received, read and will comply with the FSSA Privacy Compliance policies. Grantee is hereby authorized by the State to create, receive, maintain, and/or transmit Personally Identifiable Information (meaning personal information as collectively defined in IC 4-1-6-1 and IC 4-1-11-3, "PII") on the State's behalf pursuant to and consistent with the Services performed under this Grant. Grantee will not use or further disclose PII except as expressly permitted by this Grant or as required by law. Grantee agrees to comply with all State laws regarding data privacy, the FSSA Privacy Compliance policies, OECOSL directives regarding data privacy, and applicable FERPA provisions as defined in 20 U.S.C § 1232g; 34 CFR Part 99.
- I may not be paid to provide pre-k services for my own child(ren), stepchild(ren) or child(ren) whom I am the legal guardian
- I understand my pre-k program will only be paid for pre-k services provided at the address listed on the grant and Provider Information Form.
- Failure to comply with the conditions of this agreement may result in the termination of my program's eligibility to receive payment through the On My Way Pre-K grant program;
- Providing false or misleading information on any documentation required by On My Way Pre-K, including but not limited to the application for enrollment, child attendance records, child assessment data or other study related data, claim forms and the Provider Information Form, may result in the termination of my program's eligibility to receive payment through the On My Way Pre-K program and repayment of funds received to date;
- Any over-payments or payment received for services not rendered will result in a required repayment to the State and that the State shall pursue all available remedies to obtain repayment.
- This agreement may be terminated by FSSA immediately for provider's breach of any provision of this agreement or by FSSA or the provider, without cause upon sixty (60) days written notice.

(Printed Name)

(Program Name)

(Signed Name)

(Date)